NOTE: You must present a valid, unexpired, government-issued photo ID displaying a date issued and an expiration date. Applicants unable to supply valid photo ID must present two different pieces of alternative documentation. Acceptable documents are a pay stub, current car registration, bank statement, letter from a government agency, lease/rental agreement, utility bill with current address, or a copy of your income tax return or W-2 form. At least one of these documents must contain your current mailing address. Requests will be mailed to the address displayed on the documents provided.

Do not send CASH or STAMPS. A non-refundable fee of \$30.00 is required for each certificate requested. If the search provides no record, \$18.00 will be refunded, and a Certificate of No Record will be issued. A \$12.00 search fee must be retained as required by Maryland law.



The Maryland Department of Health and Mental Hygiene

Center for Maternal and Child Health 201 West Preston Street, Room 309 Baltimore, Maryland 21201 1-877-4MD-DHMH (463-3464) Fax 410-333-5233 Maryland Relay 1-800-735-2258

Martin O'Malley, Governor Anthony G. Brown, Lt. Governor John M. Colmers, Secretary

The services and facilities of the Maryland Department of Health and Mental Hygiene (DHMH) are operated on a non-discriminatory basis. This policy prohibits discrimination on the basis of race, color, sex, or national origin and applies to the provisions of employment and granting of advantages, privileges, and accommodations.

The Department, in compliance with the Americans With Disabilities Act, ensures that qualified individuals with disabilities are given an opportunity to participate in and benefit from DHMH services, programs, benefits, and employment opportunities.

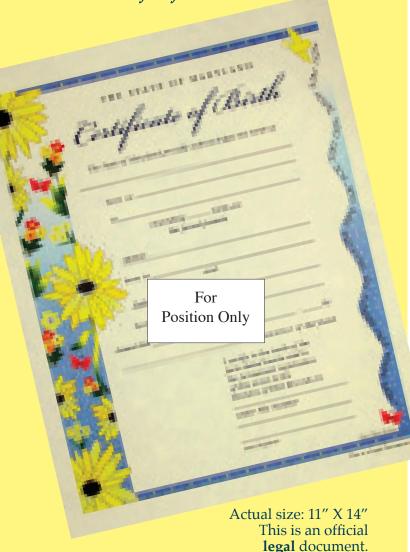
The Commemorative Birth Certificate Program is administered by the Division of Vital Records, Maryland Department of Health and Mental Hygiene 6550 Reisterstown Road Baltimore, Maryland 21215 410-764-3038 Toll Free 1-800-832-3277 www.vsa.state.md.us

The Maryland Commemorative Birth Certificate

Celebrate the joy of a new birth or the life of a loved one!

For more information about the Maryland Children's Trust Fund or the Commemorative Birth Certificate Program, visit the Center for Maternal and Child Health's Web site at www.fha.state.md.us/mch.

> For more information call 410-764-3038 or Toll Free 1-800-832-3277.



The Commemorative Birth

Certificate is a specially designed legal birth certificate available to anyone born in Maryland. This is a unique keepsake to celebrate the birth of a new child, or to be given as a special gift to a friend or relative born in Maryland.

The Commemorative Birth Certificate features:

- A design that includes the state flower, the Black-eyed Susan
- Handwritten calligraphy
- A generous 11" x 14" size, on heirloom quality paper suitable for framing
- An official embossed seal of the State of Maryland
- A quotation from a Maryland poet, Sister Maura Eichner
- The signature of Maryland's Governor, Martin O'Malley

The Children's Trust Fund

Proceeds from the purchase of a Commemorative Birth Certificate will be deposited into the **Children's Trust Fund**. Administered by the Maryland Department of Health and Mental Hygiene's Center for Maternal and Child Health, the Trust Fund provides grants for programs and activities for prevention and treatment of child abuse and neglect.

How to Order

The cost of a Commemorative Birth Certificate is \$30.00, \$15.00 of which is donated to the Children's Trust Fund, and is fully tax deductible.

If you wish to order a Commemorative Birth Certificate by mail, please send a completed application, a photocopy of required identification, and the required fee (check or money order) payable to the Division of Vital Records to:

Department of Health and Mental Hygiene

Division of Vital Records 6550 Reisterstown Road Baltimore, Maryland 21215

State regulations require that the Commemorative Birth Certificate only be issued to the person named on the record, or a parent, legal guardian, or authorized representative (having a notarized letter of authorization from the person on the record, a parent, or legal guardian).

The Commemorative Birth Certificate will be mailed directly to the person named on the Certificate, or the eligible buyer (those individuals listed above).

Application For A Commemorative Birth Certificate

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1.					
	Name of individual on record (first, middle, last)				
	Date of Birth (month/day/year)	Sex			
			, MD		
	Place of Birth (city and county)				
	Father's full name				
5					
٠.	Mother's full maiden name				
6.	Signature of Person Ordering Certificate				
_					
/٠	Your relationship to Line 1				
8.	Your Daytime Telephone Number				
9.	Your Address				
10	Your City State	ZID			
	•	ZII			
Ρl	ease mail certificate(s) to:				
	Name of Recipient				
	Address of Recipient				
	City State	ZIP			
	•				
	Talambana Niverban of Danimiant				

Telephone Number of Recipient

Eight to ten weeks are required for delivery.

If this purchase is a gift for someone, please write a personalized note to the gift recipient to be included in the envelope along with the Commemorative Birth Certificate.